Fill in this information to	o identify your case:	
Debtor 1	Douglas M. Kahler	
Debtor 2 (Spouse, if filing)	Lori L. Kahler	
United States Bankrup	ccy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	
	12170-PMM	Check if this is:
(If known)		 An amended filing A supplement showing postpetition chapter 13 income as of the following date:
Official Form		MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Employment status	☐ Employed	☐ Employed
attach a separate page with information about additional		■ Not employed	■ Not employed
employers.	Occupation		
Include part-time, seasonal, or self-employed work.	Employer's name		
Occupation may include student or homemaker, if it applies.	Employer's address		
	How long employed ti	nere?	

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 0.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ 0.00 3. Calculate gross Income. Add line 2 + line 3. 0.00 0.00

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Deb Deb	tor 1 tor 2	Douglas M. Kahler Lori L. Kahler	_	Cas	se number (<i>if known</i>)	23-121	70-PMM	
	Cop	by line 4 here	4.	F	or Debtor 1		ebtor 2 or ling spouse	
_	1 !-4							
5.		all payroll deductions:	- -	Φ.	2.22	•	0.00	
	5a.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a.	\$ \$	0.00	\$	0.00	
	5b. 5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5b. 5c.	Ф \$	0.00	\$ 	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+		0.00	· · · · · · · · · · · · · · · · · · ·	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	0.00	
8.	8b. 8c.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8a. 8b. nt 8c. 8d.	\$ \$ \$ \$	0.00 0.00 0.00 2,574.00	\$ \$ \$	0.00 0.00 0.00 0.00	
	8e.	Social Security	8e.	\$	0.00	\$	1,913.30	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.	\$	0.00 0.00	\$ 	0.00	
	8h.	Other monthly income. Specify:	8h.+	- \$	0.00	+ \$	0.00	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	2,574.00	\$	1,913.30	
10	Cal	culate monthly income. Add line 7 + line 9.	10. \$		2,574.00 + \$	1 013	3.30 = \$	4,487.30
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. ψ		2,374.00	1,910	<u>,.30</u> - Ψ —	4,407.30
11.	State Included the other Double	te all other regular contributions to the expenses that you list in <i>Schedul</i> ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify:	ır depen		•		nedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The re e that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Cert</i> alies					Combin	
13.	Do ; ■	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	n?				monthly	income

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